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June 2025



JCC & SMC team up to train nurses

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Two Samaritan Medical Center nurses provide care to a child in the hospital's pediatric ward. National Nurses Week was in May. Samaritan hired more than 50 nurses during the month of May. Photo courtesy of Samaritan Medical Center

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Samaritan Honors Outstanding Nurses in Recognition Event



Samaritan Medical Center

Watertown, NY – On May 8, a select group of Samaritan nurses were honored for their outstanding contributions to the organization, its patients, and long-term care residents. The exclusive event, held at Samaritan Summit Village, recognized the enduring dedication and professionalism of both Registered Nurses (RNs) and Licensed Practical Nurses (LPNs) throughout their careers with Samaritan.

Qualified medical providers were invited to nominate nurses by submitting essays that highlighted the meaningful relationships between nurses and providers, showcasing the deep collaboration essential to quality care.

Samaritan Medical Center President and Chief Executive Officer Tom Carman welcomed attendees, setting the tone for an evening of heartfelt appreciation and reflection. Dr. Marylene Duah, infectious disease specialist, served as the master of ceremonies, guiding the program with poise and passion.

John Green, Samaritan's Vice President of Patient Care Services and Chief

Nursing Officer, expressed his admiration for the honorees:

"Nurses are the heart of our healthcare system, and the compassion and professionalism displayed by these individuals set the standard for what patient-centered care truly means," said Green. "It is a privilege to celebrate their achievements and to recognize the powerful connections they build with both patients and colleagues every day."

This annual recognition event is part of Samaritan's ongoing commitment to honor and support the invaluable work of nursing professionals across the system.

The following individuals were honored in their respective categories:

Education:
Recipient: Natalie Jackson, BSN, RN – Intensive Care Unit
Nominated by: Rory Sears, DO

Excellence in Nursing Practice (Medical Center):
Recipient: Shirley Ward, RN – Interventional Radiology
Nominated by: Russell Reeves, MD

Excellence in Nursing Practice (Long Term Care):
Recipient: Deb Lashway, LPN – Samaritan Summit Village
Nominated by: Collins Kellogg, MD

Excellence in Nursing Practice (Clinics):
Recipient: Janielle Siver, RN – Samaritan Ear, Nose & Throat (ENT)
Nominated by: David Gordon, MD

Innovation:
Recipient: Katheryn Shadeed, RN – Interventional Radiology
Nominated by: Marlene Duah, MD

Leadership:
Recipient: Michael Belles, RN – Emergency Department
Nominated by: Maja Lundborg-Gray, MD

Quality and Safety:
Recipient: Kristan Andrus, RN – Quality Improvement
Nominated by: Maja Lundborg-Gray, MD; Rory Sears, DO; and Brian Zafonte, MD

Rookie of the Year:
Recipient: Deni Hotchkiss, RN – Surgical Services
Nominated by: Brian Zafonte, MD

Quality and Safety:
Recipient: Kristan Andrus, RN – Quality Improvement
Nominated by: Maja Lundborg-Gray, MD; Rory Sears, DO; and Brian Zafonte, MD

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Carthage Area Hospital welcomes Dermatologist Amy Lynn Werchinski

Carthage Area Hospital

Carthage, NY — Carthage Area Hospital, a member of the North Star Health Alliance, is excited to welcome Amy Lynn Werchinski, MPAS, PA-C to its expanding medical team. A seasoned clinician with expertise in both adult and pediatric dermatology, Werchinski brings a compassionate and personalized approach to dermatologic care for patients of all ages.



Amy Werchinski. Contributed.

With a deep passion for pediatric dermatology, Werchinski is committed to providing specialized care tailored to children's unique needs. Her approach emphasizes the importance of establishing long-term relationships with patients and their families, ensuring consistent and supportive care throughout each patient's journey.

"I love acting as a guide for my patients, treating them as I would my family members while respecting their own personal health needs and desires for treatment," said Werchinski.

"I feel it is important to take the time to listen to my patients and get to know them as a whole person. My role is to continue to work with my patients to find them the answers and best care possible. I pride myself on being accessible and love to teach and share my clinical knowledge."

In addition to pediatric care, Werchinski brings ad-

vanced skills in skin cancer prevention, diagnosis, and treatment, further enhancing the hospital's dermatology capabilities. Her dedication to serving rural and underserved communities also aligns seamlessly with Carthage Area Hospital's mission to deliver exceptional, accessible care throughout the region.

"We are excited to have Amy join our team," said Jerian O'Dell, COO of CAH. "Her clinical expertise, passion for education, and heartfelt approach to patient care make her a tremendous asset to both our hospital and the communities we serve."

Appointments with Amy Lynn Werchinski, MPAS, PA-C, are now available at Carthage Area Hospital's Dermatology Clinic. To schedule a visit, please call 315.493.0110 or visit www.carthagehospital.com for more information.

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JCC, Samaritan Medical Center symmetry creates pipeline for nurse graduate hires

By **BRIAN KELLY**

bkelly@wdt.net

WATERTOWN — Jefferson Community College and Samaritan Medical Center have created a symmetry between the school's nursing program and the hospital's patient care needs that has led to the vast majority of recently hired soon-to-be-registered nurses coming through the JCC pipeline.

JCC's two-year Associate of Applied Science in Nursing program has routinely been recognized as one of the top nursing programs in the state. Its students' performances on the National Council Licensure Examination for Registered Nurses (NCLEX-RN), a licensure requirement of all RNs used by state boards across the country to assess student competency, have come with student passing rates that have exceeded 95%.

That success has not been lost on Samaritan. The hospital has recently hired 49 nurse graduates — nurses who have completed their



A Samaritan Medical Center nurse talks to a patient in the hospital's medical/surgical unit in Watertown. Photo courtesy of Samaritan Medical Center

college program, but still need to pass the RN exam — and plans to hire four more, for a total of 53. Probably not coincidentally, JCC plans to graduate 54 new nurses this month.

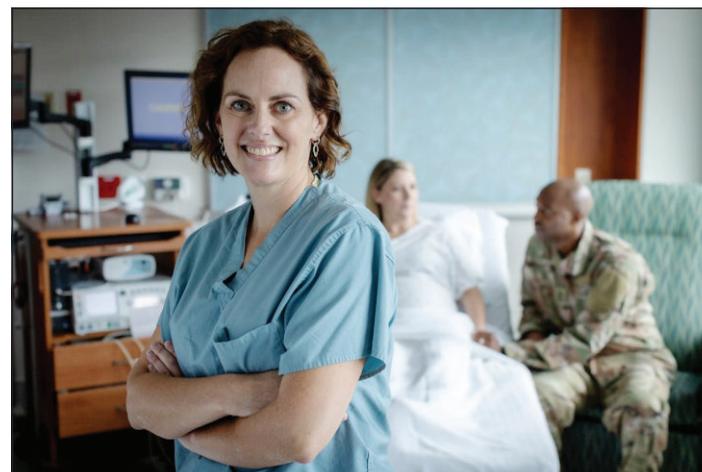
Not all of Samaritan's new hires will come from JCC, but the vast majority of them will, according to John Green, the hospital's chief nursing officer.

"JCC is vital. They are our main feeder," Green said.

The JCC program and Sa-

maritan are already closely aligned. JCC's Director of Nursing Kady L. Hoistion said students in the program perform 500 hours of clinical time at Samaritan, providing direct care, most of it bedside.

Therefore, Green said, they are already established in the Samaritan setting and have made connections with existing staff, making the transition to the workplace more seamless and allowing them to better focus



A Samaritan Medical Center nurse assists a patient in the hospital's labor and delivery ward. National Nurses Week runs through Monday. Photo courtesy of Samaritan Medical Center

on patient and clinical care.

"These nurses actually thrive better," he said. "It has a lot of benefits."

Hoistion said JCC has a dedicated faculty that helps train the nurses so they are ready to fill positions not only at Samaritan, but nationally and internationally, adding that JCC's relationship with Samaritan has been "mutually impactful."

"The partnership we have with Samaritan provides great value to our program,"

she said. "It's great to see nurses choose to work there after they graduate."

A nationwide shortage of nurses has created a market that virtually guarantees a graduate nurse a job somewhere. JCC's job placement rate for those actively seeking employment is 100%, Hoistion said.

"Any student that is seeking employment will have a job," she said.

For many, Samaritan provides an opportunity for local students, or those who have completed military service in the area, to remain in the local area, employed.

"Most of them are embedded here, have roots here, and they want to be part of a thriving hospital," Green said. "They just strengthen our mission. We're doing everything to secure the best nurses we can. These nurses are local and that translates into better patient care and a better patient experience."

So if Samaritan has its typical class of 50 to 60 graduate nurses next year?

"I want to have 50 to 60 jobs for them," Green said.

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SUNY Canton picked for new nursing center

CAMPUS ONE OF THREE IN N.Y. TO HAVE SIMULATION HUBS

Times staff report

CANTON — SUNY Canton has been selected as one of three SUNY campuses where regional nursing simulation centers will be established.

Gov. Kathleen C. Hochul announced Friday that SUNY Canton has been awarded an \$8 million grant to expand its nursing programs with equipment, qualified staff and physical space to offer quality simulation learning experiences to students.

The funding is part of a \$62 million investment that includes \$35 million in direct SUNY capital awards, with the remaining funds contributed by campus matches.

In addition to SUNY Canton, nursing simulation centers will be established at University at Buffalo and SUNY Stony Brook.

Buffalo has been designated as a SUNY-Wide Nursing Simulation Center of Excellence, envisioned as a cutting-edge hub for simulation-based education and innovation across the SUNY system.

“By investing in nurses of the future, we’re investing in the talent of aspiring professionals across the state and in the health care workforce we rely on,” Hochul said in a statement. “The SUNY nursing simulation centers will make extraordinary strides toward preparing students and strengthening the pipeline of excellence in our SUNY system and beyond.”

According to SUNY Canton School of Science, Health and Criminal Justice Dean Michele A. Snyder, the college for the past 20 years has integrated simulation training into its nursing curriculum with the use of computer-controlled, life-like animatronic patient mannikins.

In addition to a new simulation hospital, the funding will help create a new task training and resource room, new anatomy and physiology laboratories, a virtual reality room

and integrated classroom and computer spaces in Wickes Hall, Snyder said in a SUNY Canton statement.

The college said the center will support significant growth across all levels of undergraduate nursing programs, including a 133% increase in the one-year Practical Nurse program, a 160% increase in the two-year Registered Nurse associate degree program a 192% increase in the Bachelor of Science in Nursing program within five years of the project’s completion.

“This major and transformative investment further establishes SUNY Canton as the North Country’s Regional Nursing Simulation Center,” SUNY Canton President Zvi Szafran said in the statement. “It will also allow us to more than double access to our quality programs at all levels, allowing us to help fill the local and statewide need for highly qualified nurses.”

In the north country, there are presently limited clinical placement opportunities, which creates significant challenges in training future nurses, particularly in obstetrics, labor and delivery, and pediatric care.

“This new regional nursing simulation center represents a game-changer for SUNY Canton and the North Country,” said Assemblyman Scott A. Gray. “We will not only see substantial growth across our nursing programs, but more importantly, we will be able to provide our students with critical training that limited clinical placement opportunities have hindered in the past, especially in high-demand specialties like obstetrics, labor and delivery, and pediatric care. This will ultimately lead to better healthcare outcomes for our communities.”

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For program questions contact :
 Michelle Graham
 Email: mgraham@nnyymca.org
 Phone: 315.782.3100
watertownymca.org

Telecommunication partnerships create patient and provider savings

BY HOLLY BONAME

Fort Drum Regional Health Planning Organization

DEVELOPMENT AUTHORITY OF THE NORTH COUNTRY AWARDED CONTRACT TO BOLSTER EXISTING TELEHEALTH NETWORK

Patients and providers across the North Country are saving money and improving their health through telehealth services enabled by unique partnerships among multiple agencies and local service providers.

Like a circulating web across the region, a telehealth communication network has facilitated savings for both medical providers and patients while continuing to grow and expand, increasing broadband access to rural communities.

Through its unique partnership with the Development Authority of the North Country (DANC), Fort Drum Regional Health Planning Organization's (FDRHPO) North Country Telehealth Partnership (NCTP) has leveraged the FCC's Healthcare Connect Fund (HCF) to enhance access to telehealth services in the North Country. The HCF is a federal program that provides funding for high-capacity broadband connectivity. Through its most recent Request for Proposal process, DANC was awarded the HCF contract in fiscal year 2025 to continue developing the telecommunication network, which increases both intranet (i.e., private and secure connections between healthcare providers) and public Internet access speeds for healthcare providers.

"As an organization ded-

icated to providing essential services to North Country communities, the Development Authority is proud to have partnered with FDRHPO since the inception of the telemedicine network to provide the infrastructure that enables these critical healthcare services," said David Wolf, DANC's Director of Telecommunications. "The telemedicine network allows healthcare providers to quickly and efficiently provide care to our rural northern New York communities."

Work began in early 2009 when FDRHPO established

the North Country Telemedicine Project (NCTP), an extensive fiber-optic network connecting more than 25 healthcare facilities in Jefferson, Lewis, Oneida, Onondaga, and St. Lawrence counties, including Fort Drum's Guthrie Ambulatory Healthcare Clinic. In 2011, FDRHPO partnered with the Adirondack-Champlain Telemedicine Information Network (ACTION) to create a second network that encompasses sites in Clinton, Essex, Franklin, Rensselaer, Saratoga, Warren, and Washington counties, along with Chittenden County in Vermont.

In 2015, FDRHPO initiated a collaboration with the Adirondack Health Institute (AHI) to form the North Country Telehealth Partnership—a unified effort to plan and implement telemedicine throughout the 12-county catchment area, covering northern and central New York. This collaboration has quickly become Northern New York's leading group fo-

cused on increasing access to healthcare through the innovative use of telehealth and telemedicine technology.

"Before the build-out of the two Northern New York Telemedicine fiber networks, most primary healthcare facilities had a maximum network speed of 56 Kbps," said Robert Hunt, Fiber Network Manager and Telemedicine Program Coordinator for FDRHPO. "To transfer the file images would have taken approximately 40 hours for a CT scan. That's just the time it takes to transfer the image to the specialist."

Today, most primary care facilities have at least 100 Mbps, and a significant number of them have 1 Gbps network speeds.

"At 100 Mbps, that CT scan of the heart takes one minute and 20 seconds. At 1 Gbps, the same CT scan takes 8 seconds," said Mr. Hunt.

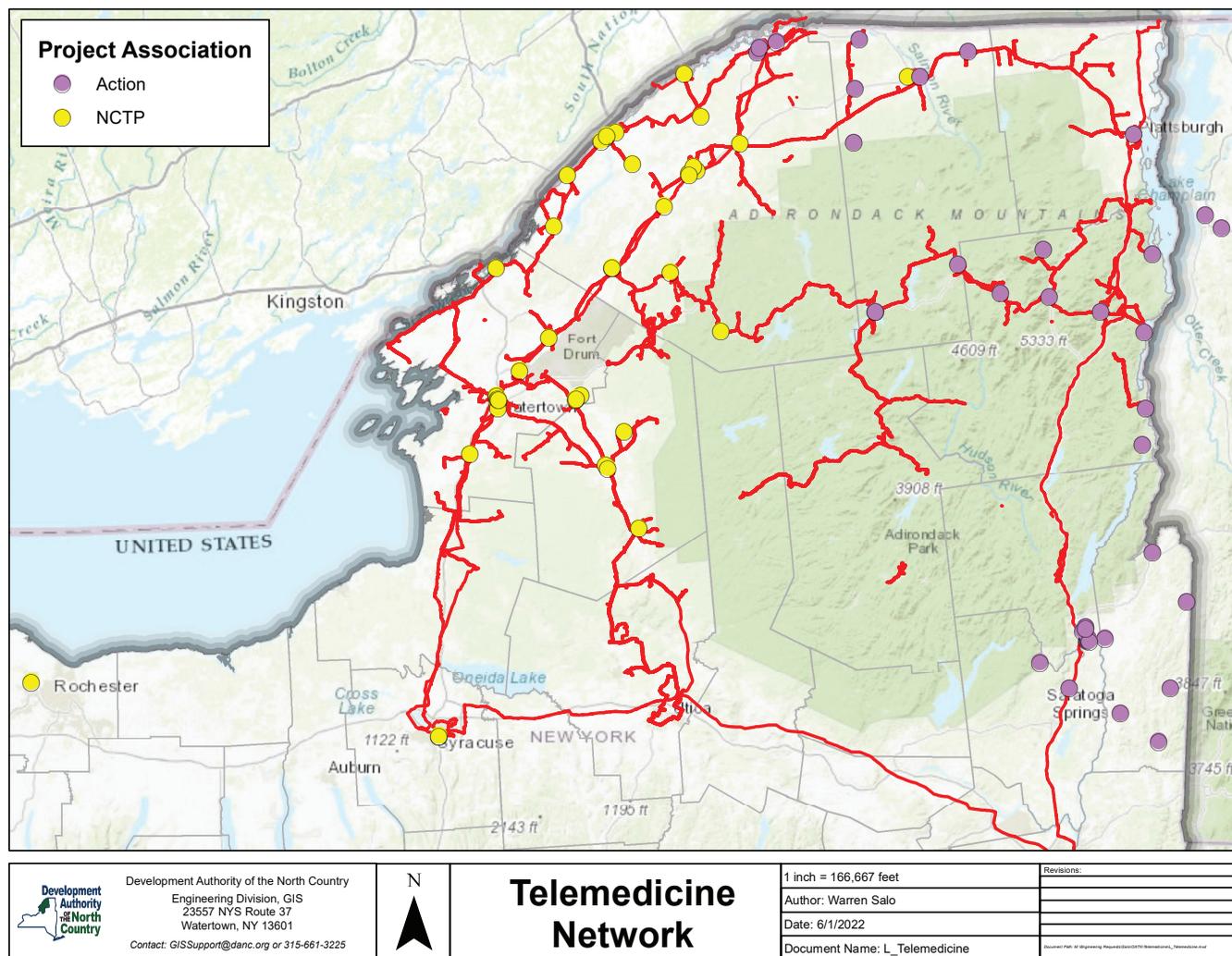
In addition to increased speed and access, the work accomplished by FDRHPO through the FCC's HCF has

provided significant cost savings for the region.

Since 2010, FDRHPO has coordinated more than \$20.5 million in savings—a 76% discount—for local providers to access the two expansive fiber-optic networks (NCTP and ACTION).

"Currently, FCC's HCF pays 65% of the total monthly recurring cost of the service," Mr. Hunt explained. "So, for example, a service that typically costs \$1,000 per month only costs the primary care provider \$350. Money that would have been spent on paying for the network service can now be applied to other urgently needed services."

FDRHPO continuously explores ways and leverages resources to increase access to healthcare accessibility and cost savings through strong partnerships with regional hospitals, healthcare providers, and organizations to create a patient-centered model for health.



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NYS budget excludes language to deem ambulances essential

EMS ADVOCATES HAVE POOR OUTLOOK FOR PROGRESS THIS YEAR

By **ALEX GAULT**
Johnson Newspapers

New York’s Emergency Medical Services providers walked away from this year’s state budgeting process without any meaningful wins, and as the last few weeks of the legislative session come up, they’re not confident this year will see any progress on their long-term recruiting, retention and financial problems.

Governor Kathleen C. Hochul had originally sought a change to language in state law to define EMS as “essential services,” and would have provided about \$5.2 million statewide to help put that into practice. But in the final budget agreement, that language and money was stripped out. The state budget did not include any language or expenditures specifically for EMS.

State Senator Mark C. Walczyk, R-Sackets Harbor, blasted the omission.

“It is simply outrageous that we have failed to reorganize EMTs as essential service providers,” he said in a statement. “When I inquired about the removal of this vital provision, all I received was blanket statements, accompanied by silence.”

Walczyk cosponsored a bill in the Senate that would have made similar changes to what the Governor was proposing, which the Senate voted to pass last year. He pointed out that EMS providers have been raising the alarm over difficult conditions for years, and are dramatically losing staff.

“It’s unacceptable that the language was removed, and people will die – and I’m not trying to be hyperbolic, but people will die,” Walczyk said.

For years, EMS providers the state over have been warning that multiple aspects of their operating models aren’t working – Medicaid, which most EMS patients are beneficiaries of, hasn’t covered the true cost of caring and transporting patients in years, recruitment drives are turning out fewer and fewer people



The New York State Capitol’s western approach. Alex Gault/Johnson Newspapers

interested in the difficult process of becoming an EMT, and the volunteer-based organizations that serve primarily rural regions of the state are shrinking too. Meanwhile, costs are continuously increasing and as the population gets older, more people are needing more complicated care.

“We are still shorthanded,” said Jeff Call, chairman of the United New York Ambulance Network and general manager of Guilfoyle Ambulance Service in Watertown.

Call said there aren’t enough training programs to rebuild the services who are losing providers to retirement, and the state is making things worse by hiring trained medical technicians at the Division of EMS – he said there are between 70 and 80 jobs open in the division that the state wants to fill with people working in the field.

“That’s going to basically take people out of the current EMS system and have them work for the state EMS office, and they’ll no longer be providers,” Call said.

Call said the budget language to make EMS an essential service was a nice motion, but would have made little to no difference in the field.

“Making us essential was just a word, they didn’t put money with it,” he said. “They wanted to make EMS essential, but nobody could agree on who was going to be responsible for making it essential.”

State law prescribes that police and fire are “essential services,” and lays out specifically what governments are responsible for providing those services. For example, state

law requires that counties provide a sheriff’s office, towns provide a fire department, and that cities must provide for both a police force and a professional fire department. The language in Hochul’s original budget proposal would not have specified which levels of government have to provide EMS, and the \$5.2 million was not likely to cover the costs of actually implementing the move either.

The counties, represented in Albany by NYSAC, have expressed concern that making EMS an essential service could force them to pay to operate county-wide ambulance services, another “unfunded mandate” from the state government that the counties would have to budget for with property and sales tax income.

“Essential is great, but it has to be funded, there has to be a funding source to back up that word, essential,” Call said. “Calling me essential

makes me feel good, but calling me essential and then saying you’re not going to pay for it, that only makes me feel good for about seven seconds before I have to ask who is ultimately responsible.”

Ambulance providers have a specific plan they’ve laid out to legislators, asking for \$20 million per year for the next three years to be dedicated specifically to paying for Medicaid patients at the same rate that Medicare patients are paid. Because so many patients that use ambulances are on Medicaid, Call said that would help to boost EMS operating budgets significantly.

“The magic number is \$67 million, to bring Medicaid up to Medicare rates, which would be a huge push for EMS,” he said.

Call noted the \$254 billion budget, which includes over \$1 billion in healthcare-related spending.

“When you’re talking about

a billion dollars in healthcare spending, it seems really stupid to me that EMS doesn’t get at least \$20 million in that,” he said. “We got nothing in the budget.”

Call said ambulance operators and the UNYAN will continue to push for meaningful change in state law to help buoy EMS operators – efforts are still underway to work up a bill to classify EMS as essential, and another to boost Medicaid and other insurance pay rates for ambulance service. But Call wasn’t overly optimistic about something passing this year – after the state budget ran overdue by more than a month, lawmakers have just about a month to wrap up voting before the six-month legislative session in Albany ends in June.

“We’re not really confident much is going to happen on our behalf, positively, just because the budget took so long,” he said. “There’s not a lot of time left.”

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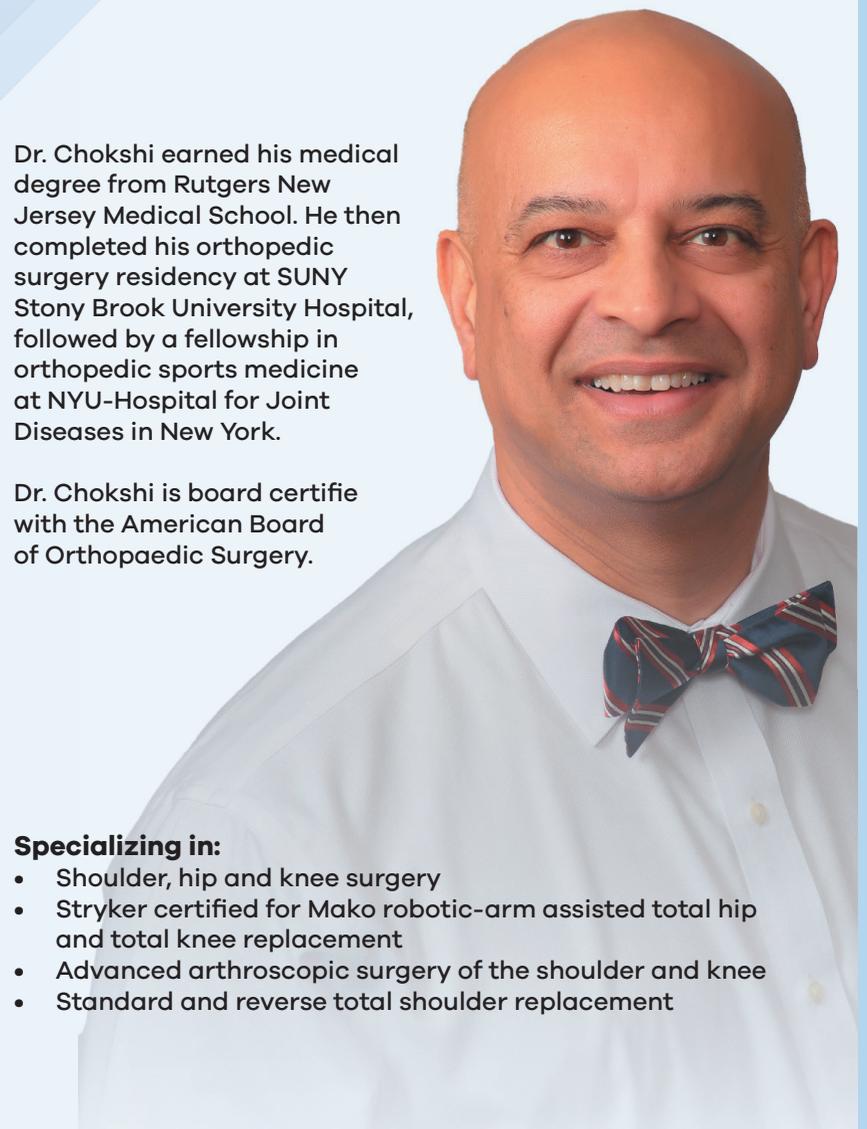
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Samaritan Medical Center Welcomes

Biren Chokshi, MD

Orthopedic Surgeon



Dr. Chokshi earned his medical degree from Rutgers New Jersey Medical School. He then completed his orthopedic surgery residency at SUNY Stony Brook University Hospital, followed by a fellowship in orthopedic sports medicine at NYU-Hospital for Joint Diseases in New York.

Dr. Chokshi is board certified with the American Board of Orthopaedic Surgery.

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